GTUCCU



SALARY OVERDRAFT SLIP

DATE: M M Y Name: Salary account no: Net Salary: Address: Amount: GMD ID/PC/VC No: Amount in Words: In the event the loan has being granted I hereby permit the GTUCCU to recover the total amount from the next cash-flow into my account. Institution/school Telephone Number: Member Signature: Loans/Approving Officer: Teller/Cashier: Receipt No:

GTUCCU



SALARY OVERDRAFT SLIP

		/
	SOOPERATIVE CREDIT UNION	DATE:
		D D M M Y Y Y
Name:		
Salary account no:	Net Salary:	Address:
Amount: GMD		ID/PC/VC No:
Amount in Words:		
In the event the loan has l cash-flow into my accoun		UCCU to recover the total amount from the next
Institution/school		
Telephone Number:		Member Signature:
_		
Loans/ Approving	σ Officer: Teller/Cashier:	Receipt No: